2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# L00000010825

Entity Name: FLORIDA EAST COAST RAILWAY, L.L.C.

Current Principal Place of Business:

ONE MALAGA ST.
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

ONE MALAGA STREET
SAINT AUGUSTINE, FL 32084

Current Mailing Address:

P.O. BOX 1048
ST. AUGUSTINE, FL 320851048

New Mailing Address:

ONE MALAGA STREET
SAINT AUGUSTINE, FL 32084

FEI Number: 59-6001115 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EDDINS, HEIDI J
ONE MALAGA ST.
ST. AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

EDDINS, HEIDI J
ONE MALAGA STREET
SAINT AUGUSTINE, FL 32084 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 04/26/2005
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: ANESTIS, ROBERT
Address: ONE MALAGA ST.
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MGRP ( ) Delete
Name: MCPHERSON, J.
Address: ONE MALAGA ST.
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MGRV ( ) Delete
Name: MACSWAIN, ROBERT F
Address: ONE MALAGA ST.
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MGRC (X) Delete
Name: ANESTIS, ROBERT W
Address: ONE MALAGA ST.
City-St-Zip: ST. AUGUSTINE, FL 32084

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: HENRIQUES, ADOLFO
Address: ONE MALAGA STREET
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: MGRM (X) Change ( ) Addition
Name: MCPHERSON, J.
Address: ONE MALAGA STREET
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: MGRM (X) Change ( ) Addition
Name: MACSWAIN, ROBERT F
Address: ONE MALAGA STREET
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ADOLFO HENRIQUES MGRM 04/26/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date